

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
BEFORE THE BOARD OF APPEALS AND INTERFERENCES

In re Patent Application of:	Confirmation No.: 6646
George G. Neuman	Date: August 2, 2006
Serial No.: 09/625,420	Group Art Unit: 3626
Filed: July 24, 2000	Examiner: Vanel Frenel
For: METHOD AND APPARATUS FOR MATCHING CONSUMER OF HEALTH CARE SERVICES TO HEALTH CARE SERVICE PROVIDER	

VIA EFS-WEB

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

APPEAL BRIEF UNDER 37 C.F.R. §41.37

Sir:

This Appeal Brief concerns the propriety of the Examiner's final rejection mailed May 3, 2006 in connection with the above-identified patent application. In support of the Notice of Appeal filed on June 2, 2006, this Appeal Brief is presented.

REAL PARTY IN INTEREST:

The real party in interest in the above-identified application is the applicant:
George G. Neuman.

RELATED APPEALS AND INTERFERENCES:

There are no related appeals or interferences of which applicant is aware regarding the above-identified application.

STATUS OF CLAIMS:

Claims 1-48 are pending.

Claims 1-48 have been at least twice rejected and are on appeal herein.

STATUS OF AMENDMENTS:

A Request for Continued Examination (RCE) under the provisions of 37 C.F.R. §114 was filed April 12, 2006. A non-final Office Action was mailed May 3, 2006. A Notice of Appeal was filed on June 2, 2006.

SUMMARY OF CLAIMED SUBJECT MATTER:

The present invention is directed to a system to match a consumer of health care services to a health care service provider over a communications network, the system comprising at least one computer terminal associated with the consumer for allowing the consumer access to the communications network; a network server coupled to the communications network, the server comprising a computer program having: a service provider data base identifying a plurality of health care service providers and a plurality of medical service associated health care service products offered by the service providers; a first software portion for receiving a diagnosis provided by a consumer or an alternative diagnosis determiner and automatically determining at least one treatment option based on the received diagnosis provided by the consumer or determined by the alternative diagnosis determiner; and a second software portion for allowing the consumer to select a treatment from the at least one treatment option and automatically determining at least one appropriate service provider for the selected treatment, based on the selected treatment and further based on a treatment preference, the treatment preference comprising at least one of: geographical location of the provider, insurance plan participation, cost, provider experience with the at least one treatment option and provider outcome with respect to the at least one treatment option.

As an example, and without limitation, the present invention of claim 1 can include a system implementing the following:

- (a) accepting a diagnosis, from a consumer of health care services including
 - 1. the public,
 - 2. organized purchasers of health care services such as insurance companies,
 - 3. health maintenance organizations,
 - 4. corporations and providers such as hospitals who wish to outsource for certain services provided on their site
- (b) automatically generating a list of treatment options,

- (c) accepting a consumer made selection of a treatment option, and
(d) automatically providing a list of health care service providers including

1. hospitals and medical centers,
2. physicians,
3. physicians' organizations,
4. dentists,
5. laboratories and other diagnostic and treatment facilities,

whose services are listed in a network accessible database. Thus the end result of the above elements is a list of service providers selected in accordance with the consumer's preferences that perform the treatment option services selected by the consumer.

The database recited in claim 1 is summarized on page 4, lines 3 to 16 of the specification as follows:

The provider database will include general and detailed demographics as well as the experience of their organization with the particular service they are providing. The provider demographic database can be linked to other independent service data organizations that can provide specific information, i.e., outcome data, about the provider whether they be organizations or individuals. The provider will list the services or products it wishes to provide. These will be organized in a descriptive, alpha numeric, DRG, CPT, etc. format for later sorting and matching to consumers. The offerings will include specifics such as price, scope of the service, experience of the provider including outcome measures which may come from the provider or another validated database such as state, Medicare, JCAHO, IPRO, etc. statistics. These items form the foundation of the provider database. This database can be updated as frequently as desired by the provider. Pricing may be related to current utilization of the provider facility, for example if the cardiac surgery census is down, the global price may be reduced to encourage business.

To achieve the objects of the invention, the consumer is asked to provide certain information to a computer process that matches the consumer's preferences with provider offerings in the database and provides the consumer with a selection of matched services. This is summarized on page 4, line 20 to page 5 line 16 of the specification as follows:

The process involved for the individual to match need to service is slightly more complicated than for an organization. A diagnosis or specific product need is necessary to utilize the service. If the consumer is uncertain of the diagnosis or service needed, the consumer is referred to a health care provider to establish the

diagnosis. Once the diagnosis is established the consumer enters the Treatment Database. A specific diagnosis can yield one or more treatment options. These treatment options are listed and the consumer can explore each of those options further. Educating the consumer is an important benefit of this site. For example, the diagnosis of lower back pain, which has been diagnosed as lumbar disc inflammation, may have numerous treatment options including surgery, pain management, acupuncture, epidural steroid injection, etc. Validated treatment outcome data for each treatment option will be provided where feasible. The final treatment selection may then be established and the consumer can then access the Treatment Preference Database. This section of the system allows the consumer to match the treatment or health care product with the provider. The consumer can then prioritize various aspects of the desired service. These include: general demographics, cost, experience and outcomes (success statistics) of the desired service. The preferred list and access links are provided for the consumer to make contact with the provider. An access code is provided to each consumer to identify himself or herself to the provider. Follow up inquiries are e-mailed to all consumers to report their experience with providers. This information will be used to establish the Consumer Satisfaction Database concerning each individual provider. The follow-up inquiry will seek to establish the quality of the service provider from initial contact through conclusion of the service.

Accordingly, independent claim 1 recites a system required to match a consumer of health care services to a health care service provider over a communications network. The system has at least one computer terminal associated with the consumer for allowing the consumer access to the communications network; and a network server coupled to the communications network. Additionally, the system includes, on the server, a computer program having:

- a service provider data base identifying a plurality of health care service providers and a plurality of medical service associated health care service products offered by the service providers;

- a first software portion for receiving a diagnosis provided by a consumer or an alternative diagnosis determiner and automatically determining at least one treatment option based on the received diagnosis provided by the consumer or determined by the alternative diagnosis determiner; and

- a second software portion for allowing the consumer to select a treatment from the at least one treatment option and automatically determining at least one appropriate service provider for the selected treatment, based on the selected treatment and further based on a treatment preference, the treatment preference comprising at least one of: geographical location

of the provider, insurance plan participation, cost, provider experience with the at least one treatment option and provider outcome with respect to the at least one treatment option.
(Underlining is added for emphasis).

GROUND OF REJECTION TO BE REVIEWED ON APPEAL:

The following grounds of rejection are presented for review:

Would the subject matter recited in claims 1-48 (reproduced in the attached appendix) be obvious at the time of invention to one of ordinary skill in the art under 35 U.S.C. § 103(a) over U.S. Patent No. 6,014,629 to DeBruin-Ashton (hereinafter “DeBruin”), in view of U.S. Patent No. 6,283,761 to Joao (hereinafter “Joao”)?

ARGUMENT:

**CLAIMS 1-48 ARE NOT OBVIOUS OVER DEBRUIN
IN VIEW OF JOAO UNDER 35 U.S.C. §103(a)**

The present invention according to claim 1 is directed to matching a consumer of health care services to a health care service provider. The matching is performed over a communications network, using at least one computer terminal associated with the consumer for allowing the consumer access to the communications network; and a network server coupled to the communications network.

The server comprises a computer program having:

a service provider data base identifying a plurality of health care service providers and a plurality of medical service associated health care service products offered by the service providers;

a first software portion for receiving a diagnosis provided by a consumer or an alternative diagnosis determiner and automatically determining at least one treatment option based on the received diagnosis provided by the consumer or determined by the alternative diagnosis determiner; and

a second software portion for allowing the consumer to select a treatment from the at least one treatment option and automatically determining at least one appropriate service provider for the selected treatment, based on the selected treatment and further based on a treatment preference, the treatment preference comprising at least one of: geographical location

of the provider, insurance plan participation, cost, provider experience with the at least one treatment option and provider outcome with respect to the at least one treatment option.
(Application, Claim 1)

Summing up, the claimed system includes a database that identifies providers and products offered by the providers; the first software portion that accepts a diagnosis from the consumer and automatically generates a list of treatment options; and the second software portion that allows the consumer to select a treatment from the list of treatment options, and automatically provides a list of providers that perform the selected treatment, this list being created in accordance with consumer's preferences, such as a location of the provider, insurance, cost, provider experience, etc.

A. DeBruin is a Non-Analogous Art.

"In order to rely on a reference as a basis for rejection of an applicant's invention, the reference must either be in the field of applicant's endeavor or, if not, then be reasonably pertinent to the particular problem with which the inventor was concerned." In re Oetiker, 977 F.2d 1443 (Fed. Cir. 1992); M.P.E.P. §2141.01(a).

The Examiner referred to col. 12, lines 37-67 of DeBruin as teaching the service provider database that identifies health care service providers and medical service associated health care service products offered by the service providers, as recited in claim 1 of the present application. This, however is not so, DeBruin does not teach or suggest listing in a database health care service products offered by the service providers. In col. 12, lines 37-54 DeBruin discusses using a random selection process to ensure that the number of all physicians and providers regardless of specialty to be printed in the directory is not too many. In col. 12, lines 55-67, DeBruin states:

In addition, an appropriate number of advertisements and discount coupons have also been selected for inclusion in the directory. All of the selected physicians and health care providers, advertisements and coupons are for physicians, providers and businesses having offices within the geographic region corresponding to the customer.

Thus, the description in col. 12, lines 37-67 of DeBruin suggests listing doctors by geographic location, paring the number of doctors in the list, and adding advertisements and discount

coupons. Therefore, the DeBruin referenced section does not rise to the level of teaching or suggesting “a service provider data base identifying a plurality of health care service providers and a plurality of medical service associated health care service products offered by the service providers” recited in claim 1.

Support for the above discussed claim 1 recitation is found on page 12, lines 1-7, of the present application. It reads as follows:

“Further, a data base 170 containing information about what is included in connection with a particular medical service, designated “products” herein, an experience data base 180 related to the participating providers’ experience with respect to certain medical products and an outcomes data base indicating the outcomes of the providers with respect to different courses of treatment, i.e., percentage of outcomes that were successful, are also provided.”

The present claimed invention is directed to matching a consumer of health care services to a health care service provider. To this end, the present invention provides information about what is included in connection with a particular medical service provided by each of the listed doctors. DeBruin merely provides lists of providers, advertisements and coupons for physicians, providers and businesses having offices within the geographic region. As such, it is respectfully submitted that DeBruin is not in the field of the Applicant’s endeavor and is not reasonably pertinent to the particular problem with which the Applicant is concerned.

Furthermore, DeBruin is not remotely pertinent to the particular problem with which the present invention is concerned. The present invention fills the void of a system or process that facilitates competitive matching of health care services to the consumer’s diagnosis.

For at least the foregoing reasons, DeBruin is non-analogous art as applied against the present application. As such, DeBruin may not form the basis (either in whole or in part) of obviousness rejections of claims 1-48.

B. The Suggested Combination of DeBruin and Joao Does Not Disclose, Teach, or Suggest Each and Every Feature of the Pending Claims.

The Examiner admits that DeBruin does not disclose the remaining elements of the claimed invention but believes that Joao does. Joao discloses a method for providing healthcare information. Joao describes:

- a. receiving or accepting symptom and condition information corresponding to a patient;

- b. generating a diagnostic report containing a list of possible diagnoses by processing symptom and condition information corresponding to a patient together with healthcare information, theories, principles, and research. The diagnostic report includes a treatment report, described at col. 25 lines 47-50 as:

“At step 707, the central processing computer 10 will then generate a treatment report which will outline and/or prescribe treatment for the single diagnosis and/or for the list of possible diagnoses, if any. The central processing computer 10, when generating the treatment report, can process same in conjunction with, and consider, possible drug interactions and/or treatment interactions.”;

- c. transmitting the diagnostic report to a healthcare provider;
- d. receiving a final diagnosis from the healthcare provider; and
- e. generating a claim form for submission to at least one of a healthcare payer and a healthcare insurer. (see Joao Abstract)

In short, Joao discloses accepting symptoms, producing a diagnosis and a treatment reports, sending the reports for approval to a medical authority, and then billing the patient or an insurance company.

To establish a prima facie case of obviousness of a claimed invention, the Examiner must show that the suggested combination teaches or suggests all of the claim limitations. In re Royka, 490 F.2d 981 (CCPA 1974); M.P.E.P. 2143.03. “All words in a claim must be considered in judging the patentability of that claim against the prior art.” In re Wilson, 424 F.2d 1382, 1385 (CCPA 1970) (emphasis added); M.P.E.P. 2143.03. If an independent claim is nonobvious under 35 U.S.C. 103, then any claim depending therefrom is nonobvious. In re Fine, 837 F.2d 1071 (Fed Cir. 1988); M.P.E.P. 2143.03.

In accordance with this standard, it is respectfully submitted that the combination of DeBruin and Joao does not disclose, teach, or suggest all of the recitations of Claim 1. As will be described below, the combination of DeBruin and Joao does not disclose, teach, or suggest each and every feature of the claim 1.

The Examiner references the Joao specification at col. 26, lines 10-61 as teaching “a first software portion for receiving a diagnosis provided by a consumer or an alternative diagnosis determiner and automatically determining at least one treatment option based on the received diagnosis provided by the consumer or determined by the alternative diagnosis determiner,” as

recited in claim 1. This, however is not so. In step 706 of Figure 7B Joao teaches generating the diagnosis report. Nowhere in Joao is there a disclosure of the system “receiving a diagnosis provided by a consumer”.

Furthermore, claim 1 clearly recites that it is “at least one treatment option” that is being determined “based on the received diagnosis”. In other words, the inventive system receives a diagnosis and creates a list of treatment options, i.e., a list of possible treatment options for the particular consumer -provided diagnosis. That list is created for a consequent selection of a treatment option by the consumer. Joao does not teach, describe, or suggest creation or compilation of treatment option lists or consequent selection of treatment options from such list.

The Examiner references the Joao specification at col. 36, line 59 to col. 37, line 9 and col. 30, line 48 to col. 31, line 4 as teaching “a second software portion for allowing the consumer to select a treatment from the at least one treatment option and automatically determining at least one appropriate service provider for the selected treatment, based on the selected treatment and further based on a treatment preference, the treatment preference comprising at least one of: geographical location of the provider, insurance plan participation, cost, provider experience with the at least one treatment option and provider outcome with respect to the at least one treatment option”, recited in claim 1. This assertion is also baseless. This, Examiner-referenced paragraph describes steps 1406–1407 illustrated in Figures 14A and 14B of Joao. The illustrated steps disclose transmitting the diagnostic and treatment reports to a medical doctor who then chooses the final diagnostic and treatment. Thus, in Joao

1. it is the medical doctor, NOT the consumer as claimed in the present application, who makes the selection; and
2. the medical doctor of Joao chooses the final diagnostic and treatment plan for the patient/consumer (possibly from the doctor’s personal experience and preferences), i.e., NOT “allowing the consumer to select a treatment from the at least one treatment option”, as recited in claim 1.

To emphasize, Joao does not teach or suggest that the medical doctor is choosing from among options in a list. The doctor’s choice is between correct and incorrect diagnosis and treatment. Providing treatment choices, i.e., listing the treatment options and allowing selection by the consumer of one of the offered treatment options is not disclosed or suggested in Joao.

Thus, because Joao does not teach providing a list of treatment options, it cannot teach or suggest any step or element that uses such a list of treatment options to make a selection.

Finally, claim 1 further recites that a list of treatment options is automatically provided, that the consumer selects a treatment option from the list, and that a list of doctors performing the selected treatment is automatically determined based on consumer preferences.

Contrarily, Joao, in the Examiner-referenced section in col. 30, line 61 to col. 31, line 1 states:

“the patient or provider accesses that central processing computer 10 and provides information regarding the service needed. At step 1002, the central processing computer 10 will process the request and identify one or more specialists along with their backgrounds, insurance coverage accepted, fees, and/or any educational, professional experience and/or any other information about the provider.”

While Joao describes presenting information for each provider to the consumer, it does not teach, describe, or suggest “automatically determining at least one appropriate service provider for the selected treatment, based on the selected treatment and further based on a treatment preference” recited in claim 1. Furthermore, Joao does not teach, describe, or suggest for the consumer to provide preferences to automatically select or determine a list of providers matching these preferences, wherein, “the treatment preference comprising at least one of: geographical location of the provider, insurance plan participation, cost, provider experience with the at least one treatment option and provider outcome with respect to the at least one treatment option” as recited in claim 1.

CONCLUSION:

For at least the foregoing reasons, Claim 1 is not obvious over the combination of DeBruin and Joao. Furthermore, since Claims 17 and 33 contain features analogous to Claim 1, and Claims 2-16 ultimately depend on Claim 1, Claims 18 - 32 ultimately depend on Claim 17, and Claims 34-48 ultimately depend on Claim 33, it is also respectfully submitted that Claims 2-48 are not obvious over DeBruin in view of Joao under 35 U.S.C. §103(a) for at least the same reasons.

For the foregoing reasons, Applicant respectfully submits that the Examiner's citations do not make obvious the claimed subject matter as a whole. Accordingly, the rejection of claims 1-48 under 35 U.S.C. § 103 should be reversed.

Credit Card payment in the amount of \$250.00 (small entity) to cover the fee for filing an Appeal Brief is submitted via EFS-WEB.

If this communication is filed after a shortened statutory time period has elapsed and no separate Petition is enclosed, the Commissioner of Patents and Trademarks is petitioned, under 37 C.F.R. §1.136(a), to extend the time for filing a response to the outstanding Office Action by the number of months which will avoid abandonment under 37 C.F.R. §1.135. The fee under 37 C.F.R. §1.17 should be charged to our Deposit Account No. 15-0700.

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosecution of this application is not paid, the Patent Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

THIS CORRESPONDENCE IS BEING
SUBMITTED ELECTRONICALLY
THROUGH THE PATENT AND
TRADEMARK OFFICE EFS FILING
SYSTEM ON August 2, 2006.

Respectfully submitted,



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CLAIMS APPENDIX

1. (previously presented) A system to match a consumer of health care services to a health care service provider over a communications network, the system comprising:

at least one computer terminal associated with the consumer for allowing the consumer access to the communications network;

a network server coupled to the communications network, the server comprising a computer program having:

a service provider data base identifying a plurality of health care service providers and a plurality of medical service associated health care service products offered by the service providers;

a first software portion for receiving a diagnosis provided by a consumer or an alternative diagnosis determiner and automatically determining at least one treatment option based on the received a diagnosis provided by the consumer or determined by the alternative diagnosis determiner; and

a second software portion for allowing the consumer to select a treatment from the at least one treatment option and automatically determining at least one appropriate service provider for the selected treatment, based on the selected treatment and further based on a treatment preference, the treatment preference comprising at least one of:

geographical location of the provider, insurance plan participation, cost, provider experience with the at least one treatment option and provider outcome with respect to the at least one treatment option.

2. (original) The system of claim 1, wherein the service provider data base comprises information related to a plurality of service providers, medical products offered by each provider, the provider's experience with each medical product, outcome of each provider with respect to each product, price for each product, description of each product and demographic location of each provider.

3. (previously presented) The system of claim 1, further wherein the first software portion automatically determines the number of treatment options based on the diagnosis.

4. (previously presented) The system of claim 3, wherein the first software portion allows selection of treatment options if more than one treatment option is available.
5. (original) The system of claim 1, wherein the alternative diagnosis determiner comprises one of a link to a medical diagnosis database and a referral to a physician.
6. (previously presented) The system of claim 4, wherein the first software portion accesses the service provider database to describe the treatment option when more than one treatment option is available.
7. (previously presented) The system of claim 6, wherein the first software portion allows the consumer to obtain a referral to a physician to assist in understanding of treatment options.
8. (original) The system of claim 1, wherein, after the consumer is matched to a service provider, an identification number is issued.
9. (original) The system of claim 8, further comprising a link to the service provider.
10. (previously presented) The system of claim 1, further comprising a consumer data base obtained from the second software portion comprising information related to the consumer's choice of service provider.
11. (original) The system of claim 10, wherein the consumer database is coupled to the service provider data base for updating the service provider data base.
12. (previously presented) The system of claim 1, wherein the second software portion has an input from the service provider data base to determine the at least one appropriate service provider.
13. (original) The system of claim 1, wherein provider outcome includes an indication of consumer satisfaction.
14. (original) The system of claim 1, further wherein the cost treatment preference includes the capability to offer a reduced cost for greater usage.

15. (original) The system of claim 1, further comprising the capability to prioritize the treatment preferences in a selected order.

16. (original) The system of claim 1, further comprising a program flow for charging the consumer a fee to participate in the system.

17. (previously presented) A method to match a consumer of health care services to a health care service provider over a communications network, the method comprising:

allowing the consumer to access the communications network to connect to a network server coupled to the communications network, the server comprising a computer program having a service provider data base identifying a plurality of health care service providers and a plurality of medical service associated health care service products offered by the service providers;

receiving a diagnosis provided by a consumer or an alternative diagnosis determiner; automatically determining with the computer program at least one treatment option based on the received diagnosis provided by the consumer or determined by the alternative diagnosis determiner;

allowing the consumer to select a treatment from the at least one treatment option; and automatically determining with the computer program at least one appropriate service provider for the selected treatment, based on the selected treatment and further based on a treatment preference, the treatment preference comprising at least one of

geographical location of the provider, insurance plan participation, cost, provider experience with the at least one treatment option, and provider outcome with respect to the at least one treatment option.

18. (original) The method of claim 17, wherein the service provider data base comprises information related to a plurality of service providers, medical products offered by each provider, the provider's experience with each medical product, outcome of each provider with respect to each product, price for each product, description of each product and demographic location of each provider.

19. (previously presented) The method of claim 17, further wherein the first step of automatically determining comprises automatically determining the number of treatment options based on the diagnosis.

20. (previously presented) The method of claim 19, where the first step of automatically determining allows selection of a treatment option if more than one treatment option is available.

21. (original) The method of claim 17, wherein the alternative diagnosis determiner comprises one of a link to a medical diagnosis database and a referral to a physician.

22. (previously presented) The method of claim 20, wherein the first step of automatically determining comprises accessing the service provider database to describe the treatment option when more than one treatment option is available.

23. (previously presented) The method of claim 22, wherein the first step of automatically determining allows the consumer to obtain a referral to a physician to assist in understanding of treatment options.

24. (original) The method of claim 17, further comprising, after the consumer is matched to a service provider, issuing an identification number.

25. (original) The method of claim 24, further comprising providing a link to the service provider.

26. (original) The method of claim 17, further comprising generating a consumer data base comprising information related to the consumer's choice of service provider.

27. (original) The method of claim 26, wherein the consumer database is coupled to the service provider data base for updating the service provider data base.

28. (original) The method of claim 17, further comprising providing an input from the service provider data base to enable said second step of determining to determine the at least one appropriate service provider.

29. (original) The method of claim 17, wherein provider outcome includes an indication of consumer satisfaction.

30. (original) The method of claim 17, further wherein the cost treatment preference includes the capability to offer a reduced cost for greater usage.

31. (original) The method of claim 17, further comprising the capability to prioritize the treatment preferences in a selected order.

32. (original) The method of claim 17, further comprising charging the consumer a fee to participate.

33. (previously presented) A computer readable storage medium for a program for operating a system to match a consumer of health care services to a health care service provider over a communication network coupling at least one computer terminal associated with the consumer for allowing the consumer access to the computer network and a network server, the computer readable storage medium comprising a computer program comprising:

a service provider data base identifying a plurality of health care service providers and a plurality of medical service associated health care service products offered by the service providers;

a first software portion for receiving a diagnosis provided by a consumer or an alternative diagnosis determiner and automatically determining at least one treatment option based on the received diagnosis provided by the consumer or determined by the alternative diagnosis determiner; and

a second software portion for allowing the consumer to select a treatment from the at least one treatment option; and automatically determining at least one appropriate service provider for the selected treatment, based on the selected treatment and further based on a treatment preference, the treatment preference comprising at least one of:

geographical location of the provider, insurance plan participation, cost, provider experience with the at least one treatment option and provider outcome with respect to the at least one treatment option.

34. (original) The storage medium of claim 33, wherein the service provider data base comprises information related to a plurality of service providers, medical products offered by each provider, the provider's experience with each medical product, outcome of each provider with respect to each product, price for each product, description of each product and demographic location of each provider.

35. (previously presented) The storage medium of claim 33, further wherein the first software portion automatically determines the number of treatment options available based on the diagnosis.

36. (previously presented) The storage medium of claim 35, wherein the first software portion allows a selection of treatment options if more than one treatment option is available.

37. (original) The storage medium of claim 33, wherein the alternative diagnosis determiner comprises one of a link to a medical diagnosis database and a referral to a physician.

38. (previously presented) The storage medium of claim 36, wherein the first software portion accesses the service provider database to describe the treatment option when more than one treatment option is available.

39. (previously presented) The storage medium of claim 38, wherein the first software portion allows the consumer to obtain a referral to a physician to assist in understanding of treatment options.

40. (original) The storage medium of claim 33, wherein, after the consumer is matched to a service provider, an identification number is issued.

41. (original) The storage medium of claim 40, further comprising a link to the service provider.

42. (previously presented) The storage medium of claim 33, further comprising a consumer data base obtained from the second software portion comprising information related to the consumer's choice of service provider.

43. (original) The storage medium of claim 42, wherein the consumer database is coupled to the service provider data base for updating the service provider data base.

44. (previously presented) The storage medium of claim 33, wherein the second software portion has an input from the service provider data base to determine the at least one appropriate service provider.

45. (original) The storage medium of claim 33, wherein provider outcome includes an indication of consumer satisfaction.

46. (original) The storage medium of claim 33, further wherein the cost treatment preference includes the capability to offer a reduced cost for greater usage.

47. (original) The storage medium of claim 33, further comprising the capability to prioritize the treatment preferences in a selected order.

48. (original) The storage medium of claim 33, further comprising a program flow for charging the consumer a fee to participate.

EVIDENCE APPENDIX

None.

RELATED PROCEEDINGS APPENDIX

None.